White senile cataract

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challenges

- Phacoemulsification in white senile cataract is a challenge ,even to the most experienced surgeon
- Difficult capsulorhexis, hardness of nucleus and weakness of zonules are some of the difficulties

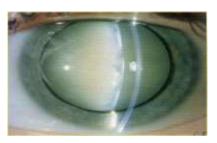
Types of white senile cataract

- Mature cataract
- Hypermature cataract
- Morganian cataract
- Intumescent cataract



- Color : pearly white , homogenous
- Normotensive[normal fluid & size]
- Slit lamp: low convexity of anterior capsule, no glistening
- Fluid free





Mature cataract

- Surgical management:
- Capsular stain
- Careful hydro dissection
- Multiple nucleus divisions during phaco



Hypermature cataract

- Corrugated, may be calcified capsule
- Hypotensive , less fluid
- Zonules may be weak, needs careful phaco
- > Same surgical steps as in mature cataract



Morganian cataract

- Color : homogenous white
- Liquefied cortex into milky soup with movable dark nucleus
- Fluid filled
- Fluid circulate in one continues space
- Capsular puncture : fluid milky cortex fills anterior chamber

Fluid cortex, one cont. space





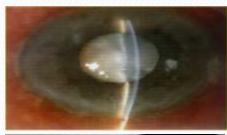
Morganian cataract

- Surgical management:
- stain capsule
- puncture
- wait until complete fluid cortex evacuation
- Exchange opaque viscoelastic
- complete rhexis then Proceed as in mature cataract
- No need for hydrodissection , weak zonules

Intumescent cataract

- Color : pearly white [various shades]
- Slit lamp: high convexity, glistening of anterior capsule
- Fluid filled , hypertensive
- Large nucl.+ cortex Divide fluid into 2 separated anterior and posterior compartments
- During rherxis posterior fluid may push nucleus forward causing extension

fluid filled,2 separate spaces





Phaco in intumescent cataract



- 2stages capsulorhexis:
- Stain
- Small rhexis 3mm
- Evacuate fluid from posterior compartment
- Enlarge rhexis
- No hydro dissection

2stages capsulorhexis

management

Spiral and 2 stages rhexsis in intumescent cataract



Intumescent cataract





Spiral rhexis

2 stages rhexis

Thank you

